

Physical Activity Readiness Questionnaire (PAR-Q)

(representative of the American College of Sports Medicine standards)

If you are planning to become more physically active than you are now, start by answering the seven questions in the box below. If you are between the ages of 15 and 69, the PAR-Q will tell you if should check with your doctor before you begin increasing your activity level. If you are over 69 years of age and you are not used to being very active, check with your doctor.

Please read the questions carefully and answer each one honestly.

No Yes

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1) Has your doctor ever said that you have a heart condition <u>and</u> that you should only do physical activity recommended by a doctor? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2) Do you feel pain in your chest when you do physical activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3) In the past month, have you had chest pain when you were not doing physical activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4) Do you lose your balance because of dizziness or do you ever lose consciousness? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5) Do you have a bone or joint problem that could be made worse by a change in physical activity? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6) Is your doctor currently prescribing drugs (for example water pills) for blood pressure or heart condition? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7) Do you know of <u>any other reason</u> why you should not do physical activity? |

Please Note:

If your health changes so that you then answer YES to any of the above questions, tell your Fitness or health professional. Ask whether you should change your physical activity plan.

If you answered YES to one or more questions

Talk to your doctor BEFORE you start becoming more physically active or BEFORE you have a fitness appraisal. Tell your doctor about the PAR-Q and which questions you answered YES.

- You may be able to do any activity you want as long as you start slowly and build up gradually or you may need to restrict your activities to those which are safe for you. Talk with your doctor about the kinds of activities you wish to participate in and follow his/her advice.

If you answered NO to all questions

If you answered NO honestly to all PAR-Q questions, you can be reasonably sure that you can:

- Become more physically active. Begin slowly and build up gradually. This is the safest and easiest way to go.
- Take part in a fitness appraisal. This is an excellent way to determine your basic fitness so that you can plan the best way for you to live actively.

Delay becoming more active if:

- You are not feeling well because of a temporary illness such as a cold or a fever. Wait until you feel better.
- If you are or may be pregnant, talk to your doctor before you start becoming more active.

INFORMED CONSENT AND RELEASE

I understand my signature signifies that I have read and understand all the information on the questionnaire, that I have truthfully answered all the questions, and that all questions/concerns I had have been addressed to my complete satisfaction.

I understand that this is a Non-Physician Supervised Fitness Program. Being fully aware of the risk associated with participation in a program of physical exercise, I hereby freely and voluntarily consent to assume such risk by participating in this Eliza's Energy Source, "The Fitness Creators" fitness, health and wellness program, a Non-Physician Supervised Fitness program.

Being of full age and in consideration of my participation in this class, I do hereby release and forever discharge the Town of Glastonbury and their agents and employees, their representatives, successors, and assignees, from all claims arising out of any and all personal injuries, damages, expenses and any loss or damage whatsoever resulting or which may result from participation in this program.

On my own behalf, and for my dependents, heirs and assigns, I hereby release Eliza's Energy Source, "The Fitness Creators" its officials, officers, agents, sub-contractors and employees, from all claims arising out of any and all personal injuries, damages, expenses and any loss or damage whatsoever resulting or which may result from my participation in the Eliza's Energy source, "The Fitness Creators" Fitness, Health and Wellness Program, a non-physician supervised fitness Program.

(Print Name)

Signature

Date